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PATENT

ELECTRONIC TRANSMITTAL LETTER

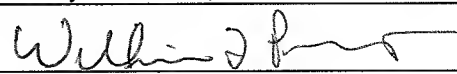
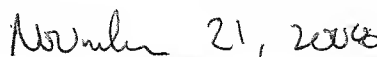
| Attorney Docket No. | Serial No. |
|---------------------|------------|
| 237P003USWO | 10/583,306 |

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

| | | | |
|--|---|-----------|------------------|
| In re Application of: | Jones et al. | | |
| Serial No.: | 10/583,306 | Examiner: | Cameron J. Allen |
| Confirmation No.: | 4474 | Art Unit: | 1797 |
| Filed: | April 24, 2007 | | |
| For: | WASTE AND TAILINGS DEWATERING TREATMENT SYSTEM & METHOD | | |
| We are transmitting the following documents: Transmittal Letter [1 page] Fee Transmittal for FY 2009 [1 page] Supplemental Information Disclosure Statement [2 pages] Form 1449 [1 page] | | | |

Please charge Deposit Account 50-0549 for any fees under 37 CFR §1.16 and §1.17 that may be required during the pendency of this application. This authorization includes the fee for any extension of time under 37 CFR §1.136(a) that may be necessary. To the extent any such extension should become necessary it is hereby requested.

Respectfully submitted,


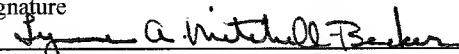
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|--|-----------------------------|--|
| Registration No. 33,995 | Direct Dial 612-455-2564 |  |
| Date:  | William F. Prout | |

United States Patent and Trademark Office

Customer No. 23322

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL
For FY 2009**☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) \$180.00**Complete if Known**

| | |
|----------------------|------------------|
| Application Number | 10/583,306 |
| Filing Date | April 24, 2007 |
| First Named Inventor | Jones et al. |
| Examiner Name | Cameron J. Allen |
| Art Unit | 1797 |
| Attorney Docket No. | 237P003USWO |

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____☒ Deposit Account Deposit Account Number: 50-0549 Deposit Account Name: IPLM Group, P.A.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | |
| Utility | 330 | 165 | 540 | 270 | 220 | 110 | |
| Design | 220 | 110 | 100 | 50 | 140 | 70 | |
| Plant | 220 | 110 | 330 | 165 | 170 | 85 | |
| Reissue | 330 | 165 | 540 | 270 | 650 | 325 | |
| Provisional | 220 | 110 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES**Fee Description**

| | Fee (\$) | Small Entity Fee (\$) |
|--|----------|-----------------------|
| Each claim over 20 (including Reissues) | 52 | 26 |
| Each independent claim over 3 (including Reissues) | 220 | 110 |
| Multiple dependent claims | 390 | 195 |

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)** - 20 or HP = x =

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)** - 3 or HP = x =

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets **Extra Sheets** **Number of each additional 50 or fraction thereof** **Fee (\$)** **Fee Paid (\$)** - 100 = / 50 = (round up to a whole number) x = **4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Supplemental Information Disclosure Statement**Fees Paid (\$)**

\$180.00

SUBMITTED BY

| | | | |
|-------------------|-------------------------|---|-------------------------------|
| Signature | <u>William F. Prout</u> | Registration No. (Attorney/Agent) <u>33,995</u> | Telephone <u>612-455-2564</u> |
| Name (Print/Type) | <u>William F. Prout</u> | Date | <u>11/23/08</u> |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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